

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 3163-01
Bill No.: SB 776
Subject: Emergencies; Health Care; health Department; Health, Public; Science and Technology
Type: Original
Date: January 9, 2004

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2005	FY 2006	FY 2007
General Revenue	(Unknown greater than \$100,000)	(Unknown greater than \$100,000)	(Unknown greater than \$100,000)
Total Estimated Net Effect on General Revenue Fund	(Unknown greater than \$100,000)	(Unknown greater than \$100,000)	(Unknown greater than \$100,000)

ESTIMATED NET EFFECT ON STATE FUNDS			
FUND AFFECTED	FY 2005	FY 2006	FY 2007
Total Estimated Net Effect on <u>All</u> State Funds	\$0	\$0	\$0

Numbers within parentheses: () indicate costs or losses.
This fiscal note contains 4 pages.

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2005	FY 2006	FY 2007
Total Estimated Net Effect on <u>All</u> Federal Funds	\$0	\$0	\$0

ESTIMATED NET EFFECT ON LOCAL FUNDS			
FUND AFFECTED	FY 2005	FY 2006	FY 2007
Local Government	\$0	\$0	\$0

FISCAL ANALYSIS

ASSUMPTION

Officials from the **Department of Health and Senior Services (DOH)** state that there is presently a system in place to assure laboratory testing of suspect bioterrorism agents. This system is a network of laboratories, level A (local public and private hospitals), level B (State Public Health Laboratories, and level C (Federal laboratories). The level of laboratory performing the testing is dependent upon the agent involved and the complexity of laboratory testing. This system is being developed in each state and the State Public Health Laboratories oversee that it is operational. Federal bioterrorism funds support the testing.

DOH assumes since a laboratory testing system for bioterrorism agents is presently in place, no additional state funding is required at this time for the State Public Health Laboratory.

The DOH states the cost of this proposal is unknown because DOH does not have an inventory of current/planned research projects and it is unclear what the definitions of “monitor” and epidemiologic studies” are as referred to in this proposal.

Oversight assumes “...monitor any epidemiological study conducted by any public or private entity...” would require DOH to monitor public or private research universities and private entities. Therefore, based on DOH assumptions of costs for monitoring such entities the fiscal impact would be unknown and greater than \$100,000.

ASSUMPTION (continued)

Officials from the **Secretary of State (SOS)** office assume this proposal authorizes the Bureau of Communicable Diseases to monitor epidemiological studies for bioterrorist agents. The Department of Health and Senior Services will promulgate rules to implement this proposal. These rules will be published in the *Missouri Register* and the *Code of State Regulations*. Based on experience with other divisions, the rules, regulations and forms issued by the Department of Health and Senior Services could require as many as 12 pages in the *Code of State Regulations*. For any given rule, roughly half again as many pages are published in the *Missouri Register* as in the Code because cost statements, fiscal notes and the like are not repeated in Code. These costs are estimated. The estimated cost of a page in the *Missouri Register* is \$23. The estimated cost of a page in the Code is \$27. The actual cost could be more or less than the numbers given. The impact of this legislation in future years is unknown and depends upon the frequency and length of rules filed, amended, rescinded or withdrawn. Officials from the SOS office estimate total cost to be \$738 [(12 pages x \$27) + (18 pages x \$23)].

Oversight assumes the SOS could absorb the costs of printing and distributing regulations related to this proposal. If multiple bills pass which require the printing and distribution of regulations at substantial costs, the SOS could request funding through the appropriation process. Any decisions to raise fees to defray costs would likely be made in subsequent fiscal years.

<u>FISCAL IMPACT - State Government</u>	FY 2005 (10 Mo.)	FY 2006	FY 2007
---	---------------------	---------	---------

GENERAL REVENUE

Cost - Department of Health and Senior Services

Program costs	<u>(Unknown greater than \$100,000)</u>	<u>(Unknown greater than \$100,000)</u>	<u>(Unknown greater than \$100,000)</u>
---------------	---	---	---

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND	<u>(Unknown greater than \$100,000)</u>	<u>(Unknown greater than \$100,000)</u>	<u>(Unknown greater than \$100,000)</u>
---	--	--	--

<u>FISCAL IMPACT - Local Government</u>	FY 2005 (10 Mo.)	FY 2006	FY 2007
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

DESCRIPTION

This act authorizes the Bureau of Communicable Diseases, which is within the Department of Health and Senior Services, to monitor all epidemiological studies conducted by any public or private entity for potential bioterrorist agents. Bioterrorist agents are agents which promote or spread bioterrorism and include, but are not limited to, anthrax, botulism, and smallpox.

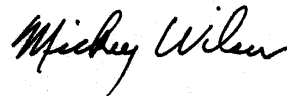
The Bureau is responsible for notifying the affected local health departments of any suspected bioterrorist agents. The State Public Health Laboratory must test and report on all samples of suspected bioterrorist agents. The reports shall include the following: 1) the name of the disease or condition being reported; 2) the date of onset; 3) the date of diagnosis; 4) the name, address, telephone number, occupation, race/ethnic group, social security number, sex, age, and date of birth for the case or suspected case; 5) the date of death, if death has occurred; and 6) the name, address, and telephone number of the person making the report.

Reports compiled by the State Lab shall be furnished in a timely manner to the affected local health department. The information contained in the reports is confidential and will not be disclosed, except upon the written consent of the affected individual.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Department of Health and Senior Services
Secretary of State



Mickey Wilson, CPA
Director
January 9, 2004